

PAYMENTS

Initial Allotment

B.5.b

Description

An Initial Allotment of up to twenty-five percent (25%) of the yearly grant amount can be requested at the beginning of each fiscal year.

Initial Allotments can be requested if the following criteria are met:

1. The grant has been fully executed,
2. The Governor's Budget for the fiscal year has been signed,
3. The prior year advance payment issued by the funding program under this agreement, if any, had been fully liquidated or repaid in full, and
4. At no time may the sum total of any advance payment exceed twenty-five Percent (25%) of the total annual agreement amount.

An Initial Allotment period and due date is bolded and italicized in the Payment Schedule below:

Payment Schedule		
Payment Type	Period	Due Date
Initial Grant Payment Request	July 1 – June 30, 20XX	August 1, 20XX
First Quarterly Invoice	July 1 – September 30, 20XX	November 1, 20XX
Second Quarterly Invoice	October 1 – December 31, 20XX	February 1, 20XX
Third Quarterly Invoice	January 1 – March 31, 20XX	May 1, 20XX
Fourth Quarterly Invoice	April 1 – June 30, 20XX	September 30, 20XX

Initial Allotment Format

An Excel file is provided by OFP containing templates for fiscal administration. Use of this workbook is mandatory. A spreadsheet is provided in this file for the initial allotment request. Instructions for completing the Initial Allotment request are located on the first tab of the workbook titled "Guide".

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An original and one copy of the Initial Allotment must:

- Be printed on Agency letterhead, and
- Be signed (in blue ink) by the Fiscal Officer (or designee).

Requesting an Initial Allotment

Initial Allotment requests will be submitted to:

Contract Manager
California Department of Health Services
Maternal, Child, and Adolescent Health/Office of Family Planning
MS 8305
P.O. Box 997420
Sacramento, CA 95899-7420

If using Courier Delivery (i.e. UPS, FedEx, Golden State Overnight, etc.)
deliver to:

Contract Manager
California Department of Health Services
Maternal, Child, and Adolescent Health/Office of Family Planning
MS 8305
1615 Capitol Avenue, Suite 73.560
Sacramento, CA 95814-5015

Note: All document deliveries not including the mail station number MS 8305 will be returned to sender by the DHS Mail Services Unit.

Initial Allotment Recovery

Initial Allotment requests will be recovered in the first three quarterly invoice periods for each fiscal year of the grant as described in the table below.

Recovery Schedule		
Quarterly Invoices	Period	Amount of Initial Payment deducted from invoice
First Quarter	July 1 – September 30, 20XX	1/3
Second Quarter	October 1 – December 31, 20XX	1/3
Third Quarter	January 1 – March 31, 20XX	1/3
Fourth Quarter	April 1 – June 30, 20XX	0 or any remaining balance

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Grantees will submit invoices for actual expenditures each quarter. The recoveries will be deducted from the invoice submitted to MCH/OFP. Grantees will receive the balance of the invoice as payment for that quarter (Total of quarterly invoice - amount of Initial Allotment MCH/OFP deducts from the invoice = Amount grantee receives for quarterly invoice) (See Payments – Initial Allotment - Example) (B.5.b).

If the entire Initial Allotment has not been recovered by the 4th quarterly invoice, the grantee will refund the balance of the initial Allotment to OFP/MCB within ninety (90) calendar days of the close of that fiscal year.

Receipt of Payment

Allow forty-five (45) to sixty (60) days for processing of a grant payment from the date OFP receives your request. Please contact your Contract Manager if payment has not been received after sixty-five (65) days.